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| APPLICANTS | | | | | | | | | |
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| | ATION: 02 52 6 | Lva | | | | | | | |
| 35 USC 119 (a-d) conditions met | | | | | | AWING CLA | | TAL AIMS 12 | INDEPENDENT CLAIMS 4 |
| ADDRESS 00757 BRINKS HOFER GILS P.O. BOX 10395 CHICAGO , IL 60610 | SON & | LIONE | | | | | | | |
| TITLE Method, device, comp | uter-re | adable storage medium and | computer | program element | for moni | toring of a r | nanufact | uring prod | pess . |
| FILING FEE FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT RECEIVED No for following: | | | | | All Fees 1.16 Fees (Filing) 1.17 Fees (Processing Ext. of time) 1.18 Fees (Issue) Other Credit | | | | |